U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only  READ THE INSTRUCTIONS CAREFUL  READ THE INSTRUCTIONS CAREFUL	LY BEFORE PREPARING THIS REPORT.	
1. File Number U - 5116	2. Fiscal Year Covered From:	
	1/1/04 Through: $12/31/04$	
3. Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name RICHARD J ANFANG	Name ST PAUL BUILDING TRADES COUNCIL	
	Labor Organization File Number 025–263	
P.O. Box, Bldg., Room No., if any RM. 206	P.O. Box, Building and Room Number, if any RM 206	
Street 411 MAIN STREET	Street 411 MAIN STREET	
City ST PAUL	City ST PAUL	
State MN ZIP Code + 4 55102	State ZIP Code +4 55102	
5. Position in labor organization.		
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.		
A. Held an interest in, engaged in transactions (including loans) with, or	sions set forth in the instructions):  derived income or other economic benefit of	
A. Held an interest in, engaged in transactions (including loans) with, or	sions set forth in the instructions):  derived income or other economic benefit of	
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.	sions set forth in the instructions):  derived income or other economic benefit of on represents or is actively seeking to represent.	
A. Held an interest in, engaged in transactions (including loans) with, or a monetary value from an employer whose employees your organization.      Name and address of Employer (including trade name, if any).	sions set forth in the instructions):  derived income or other economic benefit of on represents or is actively seeking to represent.	
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.  6. Name and address of Employer (including trade name, if any).  Name	sions set forth in the instructions):  derived income or other economic benefit of on represents or is actively seeking to represent.	
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.  6. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:	derived income or other economic benefit of on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.	
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A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.  6. Name and address of Employer (including trade name, if any).  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  ZIP Code + 4	derived income or other economic benefit of on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.  7.b. Amount.  Perjury and other applicable penalties of the law, that all of the information ng documents), has been examined by the signatory and is, to the best of the	
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany).	derived income or other economic benefit of on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.  7.b. Amount.  Perjury and other applicable penalties of the law, that all of the information ng documents), has been examined by the signatory and is, to the best of the	

Name of Person Filing RICHARD J ANFANG		File Number <b>U</b> -
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is activally any part of which consists of buying from or selling or leasing directly or incidealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise	s
8. Name and address of Business (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	9. Business deals with:  a. Labor Organizat  b. Trust  c. Employer	tion
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealir	ng.
Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street		
	11.b. Approximate dollar value	e of such dealing.
State	12.a. Nature of interest held	d or income received.
	12.b. Amount.	go possibility major pat convention and opposite transport transport regions and opposite company, and opposite transport regions are considered and opposite transport regions and opposite transport regions and opposite transport regions and opposite transport regions are considered and opposite transport regions and opposite transport regions are considered and
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money		•
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.	
(including trade name, if any).  Name STEVE HURLBERT  Trade Name, if any: NORTHERN CAPITAL MGMT	DINNER W/S	POUSES

Form LM-30 (2003)

Street

City

State

P.O. Box, Bldg., Room No., if any  $\c|_{RM}\c|_{500}$ 701 4TH AVE S

MINNEAPOLIS

13.b. Is the Business an Employer

ZIP Code + 4 55415

or Consultant X

14.b. Amount of payment.

APPROX \$75.00

Name of Person Filing RICHARD J ANFANG		File Number U-	
B. Held an interest in or derived income or economic benefit with monetary va substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acti (2) any part of which consists of buying from or selling or leasing directly or included ing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or firectly to, or otherwise		
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Street	11.b. Approximate dollar value	e of such dealing.	gate (gateria) representativa de la completa de la
State	12.a. Nature of interest held	or income received.	
	12.b. Amount.		
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money			Sensory the charge and character agreement a color an advantage and a color an
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.		etherental territoria de la companya
(including trade name, if any).  Name MCGOUGH CONSTRUCTION CO.  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	BREAKFAST		
Street 2737 N FAIRVIEW			
City ST PAUL State MN ZIP Code + 4 55113			
13.b. Is the Business an Employer X or Consultant ?	14.b. Amount of payment.		\$15,00

Name of Person Filling RICHARD J ANFANG		File Number U-	
B. Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business ively seeking to represent, or directly to, or otherwise		
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Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any			
Street	11.b. Approximate dollar value	e of such dealing.	
City	12.a. Nature of interest held	or income received.	ad engledistanting peliferantassated or swell-block comment on the section on promotivation protecting page.
State International Process of the Control of the C			
	12.b. Amount.		
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above)		Manuface of chief engages (1) (their degrees with new chief and all dates).
<ol> <li>Name and address of Employer or Labor Relations Consultant (including trade name, if any).</li> </ol>	14.a. Nature of payment.		
Name KRAUS-ANDERSON CONSTRUCTION CO	LUNCH		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street 200 GRAND AVENUE			
City S.T. P.AU.L.			
State MN ZIP Code + 4 55102			
13.b. Is the Business an Employer X or Consultant ?	14.b. Amount of payment.	APPROX	\$15,00

Name of Person Filing RICHARD J ANFANG	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary va substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acti (2) any part of which consists of buying from or selling or leasing directly or inc dealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business ively seeking to represent, or directly to, or otherwise	
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10. If 9.b. or 9.c. is checked give trust or employer's name.  Name	11.a. Nature of such dealing.	
Street  City  State  ZIP Code + 4	11.b. Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.	Commence of the control of the contr
	12.b. Amount.	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money		z
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name MCGOUGH CONSTRUCTION CO.  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 2737 N FAIRVIEW  City ST PAUL  State MN ZIP Code + 4 55113	14.a. Nature of payment.  HOLIDAY PARTY	Annual and the control of the contro
13.b. Is the Business an Employer X or Consultant ?	14.b. Amount of payment. \$25–50,00 ?	<b>,</b>